



City and County of the City of Chester

### ANNUAL REPORT

TO THE

MAYOR, ALDERMEN AND COUNCILLORS OF THE CITY AND COUNTY OF THE CITY OF CHESTER

On the Health of the City

and the

Work of the Health Department in 1958

BY

D. F. MORGAN, M.B., Ch.B., D.P.H., Medical Officer of Health.

Together with the Report of the CHIEF PUBLIC HEALTH INSPECTOR W. B. CALDER, F.R.S.H., M.P.H.I.A.

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### HEALTH COMMITTEE, 1958

### Chairman:

Alderman E. E. Ashton

### Deputy Chairman:

Alderman Arthur Charmley

### Members:

Alderman Charles Sconce Alderman Dr. David R. Owen Alderman T. Price Councillor L. Edwards Councillor P. G. Coleman Councillor Rev. E. J. Lawson

Officer in charge Ambulance

Depot .....

Councillor Florence M. Grogan Councillor H. A. A. Howell Councillor F. V. Hedley Councillor J. F. Leatherbarrow Councillor A. E. Ainsworth Councillor Stella Ford

### Co-opted Members:

Dr. W. Gilchrist Col. C. W. Marsden B. A. Williams

### STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health	D. F. Morgan, M.B., CH.B., D.P.H.
Deputy Medical Officer of Health	Ivy F. Fallon, M.R.C.S., L.R.C.P., D.P.H.
Assistant Medical Officer of Health	D. P. W. Roberts, M.B., CH.B., M.R.C.S., L.R.C.P., D.O.R.C.O.G., D.P.H.
spector, Food Inspector, Factory Acts Supervision, etc.	W. B. Calder F.R.S.H., M.P.H.I.A.
Superintendent Health Visitor and Non-Medical Supervisor of Midwives	Miss B. M. Long, S.R.N., S.C.M., P.H.A. CERT. (Royal Coll. of Nursing)
Superintendent Home Nursing Service	Resigned 29/12/58  Miss M. H. Greenwood, S.R.N., S.C.M., Q.N.
Chief Clerk	R. W. Hudson
Domestic Help Organiser	Miss M. H. Ashley
Occupation Centre Supervsr.	Miss M. E. Chappelle
Off : 1 - A 1-1	

S. Chesters

Telephone: Chester 20432

HEALTH DEPARTMENT, ST. MARTIN'S HOUSE, CHESTER.

Mr. Chairman, Ladies and Gentlemen,

During 1958 many of the Health Services were overhauled and improved, but most of the developmental schemes had to be deferred. The pressing need for economy was paramount and our motto was 'make do and mend.'

Our one purpose-built clinic which was to have been planned in connection with the Community Centre at Blacon, was not proceeded with.

You decided to purchase Radio Telephone equipment for the Ambulances in 1959, and there was room for improvement in the vehicles themselves.

After a thorough investigation, efforts were made to bring the staff of Health Visitors up to establishment, and to fill deficiencies in the other Nursing Services.

Changes in the Ambulance Service, District Nursing, Occupation Centre, Welfare Food Service and Office Staff are noted in the Report.

Once again I pay tribute—perhaps now more than ever justified—to the loyalty and assiduity of the staff of the Department. They know from your expressions of appreciation that you have been aware of their efforts. Perhaps the best reward one can receive in the Local Government Service is the satisfaction gained by working pro bono publico. Nobody can call ours a Welfare State when so many have as their goal their own selfish ends. But in such an Interdependent Community, the leadership given by the Health Department in personal service is unquestioned. We leave 1958 therefore with the feeling that, however stringent may have been our circumstances, we, as a Department, have endeavoured to give the best service possible to enhance good health in the City.

I remain,

Your obedient servant,

D. F. MORGAN,

Medical Officer of Health.

### GENERAL STATISTICS

Area in acres							4659
Population (Regi	strar Ge	neral's es	timate)				59300
Number of inhab	ited hou	ses					17967
Rateable Value						£	874868
Sum represented	by a per	ny rate					£3488
				m. co			
		VITAL	STATIS	TICS			
Live Births		Male	Female	Total		Rate pe	
Legitimate		486	434	920	1	Populat	1011
Illegitimate		24	26	50			
Totals	•••	510	460	970		16.3	
Over no labor						_	
Still Births							per 1,000 l) Births
		17	8	25	(	25.0	
Live and Still Bir	rths						
Totals	•••	527	468	995			
<b>Infant Deaths</b>							
					Death	ı Rate p Live Bir	er 1,000
All Infants		5	13	18		18.6	
					Death	Rate p	er 1,000
Legitimate In	fants	4	13	17	legitir	nate Li 18-2	ve Births
Legitimate in	ranco		13	-/	Death		er 1,000
*** *** *	<b>c</b> .			,		mate L	ive Births
Illegitimate In	tants	1		1		20.0	
Neonatal						1 Rate p Live Bi	er 1,000 rths
(first 4 w	eeks)	4	7	11		11.3	
Illegitimate I	ive Birt	h percen	tage of T	Cotal Live	Births	5-1	15
75. 07							
Deaths						a Rate p Popula	er 1,000 tion
All Causes		320	327	647		10.9	
							er 1,000
					Lotal	(Live a Birth	ınd Still) s
Maternal (inc							
abor	rtion)					0.0	
					Deat	h Kate j Popula	per 1,000 tion
Respiratory T	ubercul	osis 2	_	3		0.0	
					Deat		per 1,000
Other forms of	of ,,	_	_	_		Popula ()-(	
	33				Deat	h Rate	per 1,000
Company		5.4	50	104		Popula	tion
Cancer	•••	54	50	104		1.	

### BIRTH RATE

The Birth Rate per 1,000 population was 16.3.

Comparative fig	gures a	re as fo	llows:-	_				
England and	Wales	•••						16.4
Chester (area	compa	arabilit	y factor	(0.94)	applied	l)		15.3
Still Births allo ,000 total (live a					_			
		INFAN	NT MC	RTAL	ITY			
There were 18 957. The mortal n 1957.						-		
Comparative fig	gures ar	e as fo	llows:–	_				
England and	Wales			• • • •				22.6
Chester (area	compa	arabilit	y factor	(1.10)	applied	l)	•••	20.46
The actual caus	ses of d	leath in	these ?	18 cases	were a	s follo	ws:—	
Pneumonia								5
Premature Bi	rths							4
Congenital M	lalform	ation,	Birth In	njuries (	& Infan	tile Di	sease	3
Asphyxia						•••		2
All other cau	ses	• • •	•••	•••	•••	•••	•••	4
	G	ENER	AL DE	ATH I	RATE			
There were 64 per 1,000 populat		s in Ch	nester r	esidents	s, giving	g a dea	th rate	of 10.9
Comparative fig	gures ar	re as fo	llows:-					
England and	Wales				•••	•••		11.7
Chester (area	compa	arability	y factor	(1.10)	applied			11.9

There were no recorded deaths from Poliomyelitis.

435 deaths or 67% of the total deaths occurred in the age group 65 years and over.

Heart disease accounted for 233 deaths and other circulatory conditions for 27 deaths.

Bronchitis was the cause of death in 39 cases, pneumonia in 34 and other respiratory conditions in 5 cases.

There were 3 deaths from pulmonary tuberculosis, but none from other forms of tuberculosis.

There were no deaths from Diphtheria, Measles or Whooping Cough.

Cancer accounted for 104 deaths, of which 70 were in the age group 65 years and over, and 22 were of the lung or bronchus.

### Deaths from Cancer of Lung and Bronchus

	1951	1952	1953	1954	1955	1956	1957	1958
Total No. of								
Deaths	646	538	521	614	680	702	626	647
Number of								
Deaths from								
Cancer of								
Lung and								
Bronchus	16	21	20	29	25	24	18	22
Percentage	2.48	3.72	3.84	4.72	3.68	3.41	2.89	3.40

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i	Tota	2	1						1	∞ !	17		29	m i	7	75		36	<b>x</b>	18	34	w v	. ر	. v	9		12	4	mc	³	
	CAUSE OF DEATH	1. Tuberculosis, Respiratory	2. Tuberculosis, Other	A Dishthania	Conob	6. Meningococcal Infections	Acute Poliomyelitis		Other Infetve. &	Cancer,	11. Cancer, Lung, Bronchus		_	يلين	16. Diabetes		, ,		21. Other Circulatory Disorders	لنصك		25. Other Respiratory			Hyperplasia	30. Fregnancy, Child Birth, Abortion	32 Other Defined & Ill-defined Dis		34. All Other Accidents	36. Homicide and Operations of War	

# VITAL STATISTICS OF DISTRICT FOR 1958 AND PREVIOUS YEARS

								10										
Rate per 1,000 Live Births	68.5	53.2	8-29	79.3	58.8	81.2	37.1	32.7	20.1	42.3	22.2	32.4	26.2	16.1	35.7	23.5	18.6	
Deaths under One Year	52	41	56	64	54	84	32	29	16	33	19	27	25	15	36	23	18	
Death Rate	12.1	12.6	13.2	13.5	12.8	14.0	12.2	12.1	11.5	13.5	11.2	10.8	10.5	11.7	11.9	10.5	10.9	
Deaths	995	576	579	604	865	661	575	578	564	646	538	521	614	089	702	626	647	
Birth Rate	16.3	16.9	18.8	18.1	19.7	22.1	18.2	18.6	16.4	16.4	17.8	17.2	16.4	15.9	17.1	16.6	16.3	
Births	759	770	825	807	917	1046	863	988	795	780	854	831	954	934	1006	985	970	
Estimated Population	46570	45410	43880	44430	46460	47190	47190	47470	48680	47600	47900	48200	58100	58500	28800	59100	59300	
Year	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	

### INFECTIOUS DISEASES

368 cases of measles and 29 of whooping cough were notified. The figures for 1957 were 736 and 105 respectively. Scarlet fever cases numbered 18, compared with 48 in 1957.

Diphtheria—again no cases were notified. The last case in Chester occurred in 1951 in hospital.

Food Poisoning. The number of cases notified was 15.

### 'You have been warned'.

Once again, attention was focussed on the measures to be taken in cases of Suspected Food Poisoning and the Ministry of Health's pamphlet on the measures necessary was circulated to General Medical Practitioners.

The important thing is immediate notification in these cases; if we are to prevent the spread of this disease, only immediate notification is of value. It is too late to wait for the postal delivery of notifications. I ask all Doctors to telephone the Health Department to notify Food Poisoning—it will save their time, our energy and possibly patients' lives.

Food Poisoning is a disease of filth. There is no excuse for faecal contamination of food—if we wish, we can completely eradicate this quite unnecessary disease. It is just up to us. If we are too lazy or busy to apply the basic principles of hygiene, we know what to expect—and whom to blame.

## NOTIFIABLE DISEASES DURING 1958

DISEASE	Under 1 year	1	2	ю	4	5—9	5—9 10—14 15—24 25—44 45—64	.15—24	. 25—44	45—64	65 & over	Age un- known	Total all ages
Diphtheria	1	1	1	ı	ı	ı	1	1	١	1	1	1	1
Scarlet Fever	1	Ī	1	I	3	13	-	-	1	1	1	1	18
Erysipelas	1	1	1	1	1	I	I	I	I	I	1	I	1
Encephalitis Lethargica	1	Ī	1	1	I	1	I	1	1	I	I	1	1
Typhoid	1	1	I	1	1	1	ı	1	1	1	ı	1	1
Para Typhoid	I	I	I	1	1	1	ı	1	1	1	ı	1	1
Smallpox	I	1	I	I	1	1	1	1	I	1	ı	1	1
Ophthalmia Neonatorum	1	1	I	I	I	I	1	1	1	1	1	1	1
Puerperal Pyrexia	I	I	1	I	1	I	1	1	1	1	1	1	1
Measles	17	34	31	43	62	175	4	-	1	1	1	-	368
Whooping Cough	4	3	ю	6	4	12	I	1	ı	1	1	1	56
Meningococcal Infection	I	ı	I	-	1	1	1	1	1	1	ı	1	_
Pneumonia	2	1	-	1	-	1	1	1	٣	∞	ν,	1	22
Malaria	I	I	I	1	1	1	1	1	1	1	١	1	1
Dysentery	1	_	I	I	1	2	1	-	1	1	1	1	2
Poliomyelitis—Paralytic	I	7	1	1	1	1	١	1	1	1	1	1	2
Poliomyelitis—Non-Paralytic	I	1	1	I	1	1	1	1	1	1	1	1	1
Food Poisoning	I	1	1	1	1	1	1	ю	4	Э	1	9	15
Acute Encephalitis—Infective	1	I	1	1	1	1	ı	1	1	1	1	1	ı
Acute Encephalitis—Post Infectious	1	ī	1	Ī	I	I	1	I	I	1	1	1	ı
						I	-						

### PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

The total of new cases notified was 40, as detailed in the following table:

### **TUBERCULOSIS**

				N	EW		E S		DEA		on-
AGE P	ERIO	DS				Respi	ratory		iratory F.	Respi	ratory
0—		• • •		_		_	_	_	_	_	
1			• • •	_	_	_	_		_	_	_
2—				_	3	2	_	—	_	—	_
5—				2	1	1				—	
10				2	—	_	_	_	_	—	_
15—				1	2	_	_	_	_	_	_
20—				_	_	1	_			—	_
25—				2	4	_	_	_	1	_	_
35—		• • •		1	4	_	_	_	_	_	_
45—				5	1	_	_	2	_	_	_
55—				4	1	_	_	2	_	_	_
65—				2	_	_	_		_	_	_
75—		•••		-	1	_		_		_	_
Totals				19	17	4	_	4	1	_	_

An account of Preventive and After-Care work is given under Prevention of Illness, Care and After-Care, later in the report.

### VENEREAL DISEASE

At the time of writing, the Minister is very concerned at the rising incidence of Gonorrhoea in the country. Concealment is the natural reaction; but this concealment is not always intentional. A female may suffer from this plague without being aware of it.

The danger of insufficiently treated—or untreated—disease cannot be overestimated. Our mental hospitals are not nowadays filled with cases of Paralytic Dementia or Locomotor Ataxia because of effective treatment in the early stages. But insufficiently treated Syphilis does still progress to such horrible ends.

It is not outside the scope of this report to mention that the best and real safeguard is clean living. The responsibility for teaching this rests absolutely upon parents themselves. There is no influence so great as theirs over their children's characters; no amount of propaganda, 'shock' posters, professional Health Visitors or lectures will materially alter what is 'bred

in the bone'. Parents must take on their responsibility themselves and teach—by example and precept—healthier physical and happier mental living.

In Chester, we have not experienced the increase of Gonorrhoea, but, from the very fact of its existence among us, there is little room for self congratulation. Among other social evils, Venereal Disease is, to some extent, a measure of the success of our education and national development.

A very close liaison has existed between the Venereal Disease Clinics and the Health Department through means of confidential communication. Contacts and cases have been followed up by Health Visitors, with their customary professional tact, and a commendable degree of success has been forthcoming.

Clinics are held at Chester Royal Infirmary as follows:—

Males—

Wednesdays, 5 p.m. to 7 p.m. Saturdays, 11 a.m. to 1 p.m.

Females—

Thursdays, 4-30 p.m. to 7-30 p.m.

The following details relate to persons, resident in Chester, who have been dealt with at the Treatment Centre for the first time.

		1954	1955	1956	1957	1958
Syphilis		5	9	6	6	8
Gonorrhoea		3	7	11	11	13
Conditions other	than					
V.D	• • • •	28	42	59	64	70
		26				
		36	58	76	81	91

### LABORATORY SERVICES

The Pathological Departments of the Chester City Hospital, the Royal Infirmary and the Medical Research Council Laboratory at Birkenhead have continued to examine all types of specimens sent either by general practitioners or the Health Department.

There is excellent co-operation between the Laboratories and the Health Department.

A Public Health Department will make a sudden demand on the services of the Laboratory almost without warning. We have been very well served indeed by the City Hospital Laboratory on the occasions when outbreaks have made such demands inevitable.

### SERVICES PROVIDED UNDER NATIONAL HEALTH SERVICE ACTS

### 1. CARE OF MOTHERS AND YOUNG CHILDREN (Section 22)

### (i) Expectant and Nursing Mothers

The possibility of a Consultant Antenatal Clinic, attended by Doctors of Consultant status was considered. Here it was felt that the facilities offered by the City Hospital were adequate to deal with the position.

### (ii) Infant Welfare

The following Infant Welfare Clinics are operated by the Health Committee; the hours of opening are from 2 p.m. to 4 p.m.

Monday: (a) St. Martin's House (Central Clinic); (b) 55, Hoole Road, (County Clinic)

Tuesday: (a) Saltney (The Institute, Hope Street); (b) 55, Hoole Road Wednesday: (a) Blacon (The Institute); (b) Boughton (Civil Defence H.Q.)

Thursday: (a) St. Martin's House

Further expansion of this Service may occur at Blacon and in other areas of the City which are not so well covered by the present Clinics.

New Sites. Efforts were made to find other accommodation for the Clinics at 55, Hoole Road, Blacon Institute and Saltney Institute. No alternative seems yet possible for Hoole and Saltney. The new Community Centre at Blacon will be utilised in 1959 but attention is drawn now to the fact that this was planned as a Community Centre and not as a Clinic; the plans originally submitted for a Clinic in Blacon have been indefinitely postponed. We have, therefore, no purpose-built Clinic, nor the prospect of one in the forseeable future.

Attendances at the various clinics were made throughout the year as follows:—

### ST. MARTIN'S HOUSE INFANT WELFARE CENTRE

	(1957)	1958
(a) By children under one year of age	2249	2160
(b) By children between the ages of one and five years	478	551
Consultations with Medical Officer:—		
(a) Children under one year, visits	673	553
(b) Children, one to five years, visits	133	131

### SALTNEY INFANT WELFARE CENTRE

	(1957)	1958
(a) By children under one year of age	1097	919
(b) By children between the ages of one and five years	216	281
Consultations with Medical Officer:—		
(a) Children under one year, visits	260	230
(b) Children, one to five years, visits	62	83
BLACON INFANT WELFARE CENTR	T.	
BLACON INFANT WELFARE CENTR	(1957)	1958
(a) By children under one year of age	1585	1281
(a) By children under one year of age (b) By children between the ages of one and five years	216	360
Consultations with Medical Officer:—	210	300
(a) Children under one year, visits	500	375
	123	
(b) Children, one to five years, visits	125	91
HOOLE INFANT WELFARE CENTR	Е	
	(1957)	1958
(a) By children under one year of age	1694	2060
(b) By children between the ages of one and five years	435	446
Consultations with Medical Officer:—		
(a) Children under one year, visits	580	590
(b) Children, one to five years, visits	74	68
BOUGHTON INFANT WELFARE CENT	гръ	
BOOGITON INVANT WELVARE CENT		1958
(a) Pry shildren under one weer of a re	(1957) 1287	1234
(a) By children under one year of age		
(b) By children between the ages of one and five years  Consultations with Medical Officer:—	270	250
(a) Children under one year, visits	287	283
· · ·		
(b) Children, one to five years, visits	60	78

### (iii) Premature Infants

The Premature Baby Unit at the City Hospital was able to cope with most babies below 5½lbs, so that few were nursed at home. Such nursing equipment as was necessary in the home was available on loan from the District Nurses' Home.

By arrangement with the Physician-in-Charge, the Health Visitors attended at the Premature Baby Unit of the Hospital. Staff shortages prevented as full attendance as would have been liked. On discharge home, Premature Babies were visited by the Health Visitors.

Excellent co-operation was maintained between the Department and the Premature Baby Unit of the City Hospital.

### (iv) Supply of Dried Milks, etc. (Welfare Foods)

On 9th August, 1954, the sale of Welfare Foods, formerly a function of the Ministry of Food, was taken over by the Local Health Authority, the premises transferred to Bishop Graham's School, Princess Street, and later to Folliott House, in Northgate Street.

National Dried Milk and all Welfare Foods and nutrients under the Government Welfare Foods Scheme were available at all the Infant Welfare Clinics. Many other kinds of Dried Milk Foods and nutrients were also available at the Clinics, and the Council's scheme provided for the free issue of these to necessitous cases.

Two full-time Clerks were employed and they, together with the Staff of the Department, carried out the necessary clerical and recording work. The Centre at Folliott House was open daily from 9 a.m. to 5-30 p.m. and from 9 a.m. to 1 p.m. on Saturdays.

Two Distribution Centres were open in Blacon.

It should be noted that, because of shortage of staff and restricted accommodation, it is not possible to permit the sale of Welfare Food to the general public at Infant Welfare Clinics. We manage, however, to make these foods available for parents who attend the Clinic regularly.

### (v) Dental Care

Shortage of Dental Officers made it not possible to provide two sessions of treatment every week for Nursing and Expectant Mothers and pre-school children. Wednesday afternoon sessions were set aside for this and the following treatment was given:—

### (a) Numbers provided with Dental Care:

	Examined	Needing Treat- ment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	55	45	39	34
Children under five	122	97	97	97

### (b) Forms of Dental Treatment provided:

					•				
							Dent Provi		-
Expectant and	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Full Upper or Lower	Partial Upper or Lower	Radiographs
Nursing Mothers	5	38	_	_	90	10	14	10	_
Children under five	_	14	48		176	84			

### (vi) Institutional Provision for Mothers and Children

The only Maternity Hospital Accommodation within the City is at the City Hospital. There are no Private Nursing Homes nor Maternity Homes. (There is some private accommodation in adjacent areas outside the City).

The City Hospital also has a department for Premature Infants, as well as Children's Wards.

The Corporation maintains one Residential Children's Home at Kingston House, Liverpool Road, for children up to 5 years old. The Medical Officers of the Department carry out the periodic examinations at the Children's Home and a General Medical Practitioner provides treatment under the N.H.S. Act.

### UNMARRIED MOTHERS AND THEIR INFANTS

Although application for assistance may be made direct to the Department, nearly all cases are referred by the Chester and District Moral Welfare Association through their Outdoor Worker. The Association investigates the cases, and finds suitable Mother and Baby Homes for the applicants. Where necessity exists, the Corporation will assist with financial help towards the expenses of the Mother and Baby Home for a period of six weeks before and six weeks after the confinement. The Authority expects the putative father to take his share of the financial responsibility.

Subsequent follow-up at home is done by the Health Visitors. All the cases helped have been illegitimate and the Vital Statistics in this Report show the proportion of these to legitimate births.

During 1958, ten cases were thus assisted. It is no easy matter to find the right kind of home with a vacancy at the right time for these patients, and investigation of these cases is not always a pleasant task. I would like to appreciate the valuable work undertaken by the Moral Welfare Association through their Outdoor Worker—which has contributed so materially to the welfare of the applicants. There must be many people, misguided in youth, who have cause to be grateful for the help they have received from the Association.

### NURSES' ACT

Two agencies are licensed under the above Act for the provision of Private Nurses.

### **NURSING HOMES**

At the end of the year, no Nursing Homes were registered under the Public Health Act, 1936.

### NURSERY AND CHILD MINDERS (REGULATION) ACT, 1948

Three premises are registered under this Act. Visits are made by the Medical Officers and Health Visitors as occasion demands.

### 2. MIDWIFERY (Section 23)

Antenatal Care of women to be confined at the City Hospital is carried out at the Hospital's Clinic.

For patients to be confined at home, there is no Local Authority Clinic, but Midwives visit them at home. In addition, they attend the sessions in their own Medical Practitioner's Surgery, for tuition in the Hygiene of Pregnancy, exercises and demonstrations in Infant Care.

City Hospital		Antenatal Clinic	Postnatal Clinic
Total number of City Patients	 	873	296
Total number of attendances	 	3672	333

The Chester City Council employs six Full-time Municipal Midwives for Domiciliary work, under the supervision of a non-medical Supervisor (who is also the Superintendent Health Visitor).

All Midwives are trained in the administration of Gas and Air Analgesia and also in the use of the newer Trilene apparatus, of which both types of equipment were in service.

Each Midwife is equipped with, and trained in, the use of Blood Pressure Apparatus for the early detection of the Toxaemias of Pregnancy.

Close co-operation was maintained between the Municipal Midwives and the doctors undertaking Domiciliary Midwifery. The Medical Aid Scheme provided for adequate medical attendance at the confinement, the Doctors' fees being paid either under their arrangements with the Executive Council, or by the Corporation (if another Doctor had to be called).

103 cases were so attended.

The City Hospital referred to the Health Department those cases who wished to book confinements at the Hospital, but did not fall into one of the necessitous groups, and, where home circumstances permitted, arrangements were made for confinement at home. Conversely, where home circumstances rendered home confinement undesirable, the case was referred to the City Hospital.

One of the difficulties arising from a shortage of Hospital Maternity Beds was that a number of mothers who wished to be confined in Hospital

had to have their babies at home, while some unmarried mothers were able to get accommodation in the Hospital because of unsuitable home circumstances. This gave rise to some discontent—as it was felt that illegitimacy should not take precedence over legitimacy. Cases were discharged early from Hospital to offset this difficulty, with some success. The Health Department and the Maternity Department of the City Hospital cooperated closely and referred cases to each other's spheres.

339 confinements were attended by the Municipal Midwives as Midwives and 23 as Maternity Nurses.

Statistics			(1057)	1050
No. of cases attended as Midwives			(1957)	1958
	• • •	•••	332 27	339 23
No. of cases attended as Maternity Nurses	•••	•••		
No. of. antenatal visits	•••	•••	2424	3205
No. of daily nursing visits	•••	• • •	5761	6455
No. of cases receiving analgesia:—			149	223
(a) Trilene	•••	•••	55	31
(b) Gas and Air	•••	•••	75	103
Doctors called in by Midwives	•••	•••	75	105
N C C. Di .				
Notification of Birt	hs			
Total number of births notified			1942	1952
Cases attended and delivered by the doctors			27	23
Cases attended in Nursing Homes			110	
Cases attended and delivered by midwives			332	358
Cases attended in Hospitals			1610	1594
No. of Still Births			56	53
Of the 358 births attended by Midwives, in	n 103	cases l	Medical A	id was
required. The necessity arose from the follow	ing c	auses:—	_	
Lacerated perineum			25	37
Haemorrhage			7	
Illness of child			5	
Complication before labour			(21)	
Complication during labour			10	24
Complication during 'lying-in' period			8	7
Complications of pregnancy	• • •		_	24
Temperature			1	
Abnormality of child			1	5
Stillbirth			5	_
Prematurity			20	6
	Tota	al	82	103

### Ophthalmia Neonatorum

No cases were notified during the year.

### 3. HEALTH VISITING (Section 24)

The establishment of our Health Visiting Services was 1 Superintendent Health Visitor/School Nurse who is also Supervisor of Midwives and 9 full time Health Visitor/School Nurses.

We have been obliged to employ State Registered Nurses and Tuberculosis Visitors to offset the shortage of Health Visitors and to release those remaining on the staff for essential Health Visiting duties. After a full investigation, it was decided to try to bring the staff up to establishment.

The duties of the Health Visitor/School Nurses are shared between Schools and Health Visiting (including Clinic) work.

(a) the Clinic Duties consist of:—

Infant Welfare

Minor Ailments

Immunisation (B.C.G., Poliomyelitis, Diphtheria and Pertussis, Smallpox Vaccination)

School Hygiene

Dental (Anaesthetic) Sessions—occasionally

Tuberculosis (Chest) Clinic

Hospital (Ante Natal)

(b) Visits were made for the following purposes:—

Maternity and Child Welfare

Problem Families

Housing and Tuberculosis

Infectious and Venereal Diseases

Mental Deficiency and Illness

Cancer Research

Special Surveys, e.g. Nutrition, Perinatal Mortality

Follow up after Hospital Treatment

Special Campaigns (e.g. Accidents in the Home)

The Hospitals sent to the Health Department copy reports of all school and pre-school Children after their discharge. These were extremely helpful to the Health Visitors when making their visits. Such co-operation is greatly appreciated.

The following visits were made by the Staff (excluding work done by them under the School Health Service):—

					(1957)	1958
Primary Birth Visits					942	1065
Subsequent Visits to Infants				•••	3786	4286
Visits to Pre-School Children					6383	6159
Visits to Expectant Mothers					198	147
Other Visits					1741	887
Visit with Midwives		•••	• • •		15	
Cases of Tuberculosis (Visits	)			• • •	440	610

The fall in visits is mainly due to difficulty in maintaining a full staff of Health Visitors. More Clinic duties were necessary, and this detracted from the time available for Home Visiting, though, of course, Clinic work is more efficient.

### 4. HOME NURSING SERVICE (Section 25)

Because of the difficulties experienced in recruiting Nursing Staff who would be resident at the District Nurses' Home, it was decided to make non-residential appointments and to run the Service from an office situated first at the District Nurses' Home, and, at the time of writing, in Folliott House, Northgate Street. The office is open from 9 a.m. to 5-30 p.m. Calls out of office hours (at night, weekends, Bank Holidays) are received at the Ambulance Depot (Chester 23676). A rota of emergency or night duty Nurses is kept and the Ambulance Service is responsible for the transport at night.

The staff consisted of Superintendent District Nurse, six full-time District Nurses and two part-time, most of whom have received Queen's (District) Training.

The Superintendent District Nurse is responsible for the distribution of nursing equipment on loan (see Prevention of Illness). During the year 192 articles were issued either on loan or hire.

From the analysis of the table following, it will be seen that 641 cases out of 1,328 were over 65, and they received 16,656 visits out of a total of 29,306 (i.e., 40% of Patients and 56% of Visits) and they received on the average 26 visits each. The appointment of a Geriatrician by the Regional Hospital Board was necessary because of the shortage of beds for chronic sick and aged. This is reflected in the figures given above.

### HOME NURSING SERVICE

		***************************************	-								-
									Cas	Cases receiving	gu
DISTRICTS		Medical	Surgical	Infectious Disease	Tuber-	Maternal	Injection Others	Aged 65 & Injections, over on Others First Visit	Aged under 5	more than 24 Visits	Total
	Cases	105	25		1	1	09	107	7	36	190
NOTHER	Visits	76	34			m	17	109	9	44	184
	Visits	1321	1269	1	1	27	1389	2428	25	2146	4006
SALTNEY	Cases Visits	85 1571	30 551	3 1	63	П 4	79	82 2279	99	43	198 3947
HANDBRIDGE	Cases Visits	64 2409	19	1.1	1.1	1.1	75	72 2572	3	44 2867	158 4644
BLACON	Cases Visits	40 850	16 303	2 10	3 164	4 61	89 1290	38 1391	19 132	30	154 2678
GARDEN LANE	Cases Visits	51	20 628	1.1	11	2 18	68	68 1878	108	35	141
CENTRAL	Cases Visits	63 2014	13 561	2 1	3 472	1.1	38	75 2180	20	28 2109	118 3536
HOOLE	Cases Visits	92 2285	22 279	2	. 2	2 %	66 1632	90 2095	38	33 2223	185 4249
TOTALS	Cases Visits	576 13441	179 4553	5 23	10 744	113	546 10432	641 16656	65 425 1	293	1328 29306
The total number of Cases and Visits in 1957 29,120 respectively.  Number of cases on books, 1-1-58, carried over fr Number of new cases  Number of cases on books at 31-12-58		were 1,294 com 1957 1 1	and 235 1093 229	Of The The 100 to to	the 1,328 the to ne average n ne average n ne average n o patients, totalling	1,328 cases atternet total visits rage number of rage number of rage number of rage number of ients, on discluding	Of the 1,328 cases attended, 641 the total visits (29,306), 16. The average number of nurses em. The average number of hours world patients, on discharge fron totalling	we 5,65 polo ked rke rke	tre aged 65 or ov 66 were paid to the yed full time was by each daily was 1 by each per wee nospital received	ri e.	and, of 7 8 8 8 48½ .its2809

A film strip on the correct method of lifting patients was purchased, and the Superintendent gave demonstrations to the staff and to the staff of Residential Accommodation in the City.

The amount of medical care and nursing attention which can be given at home is not so concentrated as that available in hospital, and there is no clear-cut dividing line between patients who need hospital beds and those who can stay at home without undue risk. Much depends on home circumstances and the number of hospital beds available. Where the hospitals do not satisfy all the calls made upon them, it will always be the lot of the Local Health Authority to make up for deficiencies.

### 5. VACCINATION AND IMMUNISATION (Section 26)

The following immunological facilities are provided by the Council:—

- (1) Vaccination against Smallpox
- (2) Immunisation against Diphtheria
- (3) Immunisation against Whooping Cough
- (4) B.C.G. Vaccination against Tuberculosis
- (5) Vaccination against Tetanus
- (6) Vaccination against Poliomyelitis

### (1) Vaccination against Smallpox

During the year, a case of Smallpox was confirmed on Merseyside and gave rise to other cases—one fatal—and a number of contacts in the City. All contacts were immediately vaccinated, and the close contacts of these were also vaccinated. Thus every case of Smallpox was surrounded by a double barrier of vaccinated people. They were kept under close surveillance during the incubation period or until adequate vaccinia had developed. Constant close contact with adjacent Authorities was maintained throughout and the question of mass vaccination was daily under consideration.

Although there was some apprehension about the spread, it was considered neither necessary nor wise to open clinics for mass vaccination in Chester—a decision which was supported by the happy confinement of the outbreak.

From the study of this outbreak and others which have occurred on Merseyside—where the only fatal cases have been people who had never been vaccinated—there is only one way to ensure safety and that is to be vaccinated against Smallpox.

Exactly the same applies to Diphtheria and protection against it.

Ages		Number Re-Vaccinated
Under one year	184	_
One year	159	
2—4 years	68	10
5—14 years	71	30
15 years and over	69	217
Totals	551	257

### (2) Immunisation against Diphtheria

Parents are given the option of having this done by their own General Medical Practitioner or of attending the Clinics. Children of pre-school age are immunised at the Infant Welfare Clinics (q.v.), and school children receive their injections and reinforcing doses at the end of the School Medical Inspections.

Records of these—and all—immunisations are kept in the Department and are transferred on change of address.

The table on the following page shows the number of children immunised against Diphtheria.

### (3) Immunisation against Whooping Cough

This is available on request from the patient's own Doctor or at the Infant Welfare Clinics, and is usually—though not necessarily—given in conjunction with Diphtheria immunisation. Three injections are necessary.

The following table shows numbers who have completed a primary course of Whooping Cough vaccine (singly or in combination), during the year:—

Age at Date of final Injection

0—4 years 5—14 years Total
164 25 189

### (4) B.C.G. Vaccination against Tuberculosis

In accordance with the approved scheme, vaccination with B.C.G. against Tuberculosis was offered to all pupils at school in the City between their 13th and 14th birthdays. 523 were tested and, where necessary, vaccinated intradermally with B.C.G. Very few abnormal reactions were reported.

As the scheme is continuous—year after year—the effect of this measure in reducing the incidence of 'adult' Pulmonary Tuberculosis will gradually become apparent in the years to come. It is noted, however, that statisti-

### **DIPHTHERIA IMMUNISATION**

Age in Years 31st Dec., of the corres- ponding year.	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	Total inocu- lated 1944-1958
0	•••		•••	10	•••	16	14	18	123	109	39	43	89	89	157	Age under 1 year
1	184	230	243	288	191	378	284	217	233	215	329	284	458	345	248	
2	80	102	108	84	294	140	74	58	70	32	101	97	114	118	70	Age 1—4 years 2083
3	37	37	40	39	78	35	24	21	39	19	50	29	58	66	62	
4	32	29	31	44	55	30	57	27	18	20	36	28	51	20	58	
5	174	118	73	84	96	61	163	48	50	76	88	30	104	59	129	
6	61	87	54	54	60	41	58	15	33	78	53	17	221	100	48	Age 5-9 yrs
7	28	28	44	17	51	6	17	2	20	21	16	11	92	39	4	Completed: 1954-1958176 1953 or
8	10	15	58	11	20		6	2	20	2	6	3	22	9	6	earlier146
9	11	12	49	12	6	2	6	3	10	1	3	1	7	7	8	0220
10	9	12	46	6	9	6	5	1	5		2	3	12	4	5	
11	9	2	45	13	6	8	12	3	5		2	9	19	15	9	Age 10-14 vr
12	6	3	36	5	4	6	2	•••	•••	3	1	6	19	12	3	Completed: 1954-1958 24
13	2	•••	26	7	3	2	•••	•••	-			•••		3		earlier30
14	5	2	75	2	3	4	12	5	• • •				3	1	1	
15 and over		•••		15	3	2	•••	•••	•••	•••	•••	5	1		•••	Age 15 years and over 2396
Total each Year	648	677	928	691	879	737	734	420	626	576	726	566	1270	887	808	GRAND TOTAL 11173
Re- Inoculations	•••		1987	955	609	1023	786	698	676	965	893	1.044	1563	1090	1030	Total Re-Inoculatio 13319

cally the results have been good in countries where B.C.G. Vaccination has been adopted for some little time. Many factors may be given as the cause of the diminishing incidence of T.B., but it would be unwise not to adopt B.C.G.—or any other satisfactory procedure—in this country, which might lessen the distressing incidence of Tuberculosis.

Reciprocal arrangements were made for the vaccination of Cheshire County pupils at Chester Schools, and City pupils at Schools in the County.

No. of Pupils tested						523
No. of these Mantoux Positive						98
No. of these Mantoux Negative	and	given	B.C.G.	Vaccin	ation	419
No. absent for reading						6

The Medical Officers of the Authority who carried out the Mantoux testing, and subsequent vaccination, attended a course of special instruction therein.

### (5) Anti-Tetanus Immunisation

The combination of a vaccine against Diphtheria, Whooping Cough and Tetanus (lock jaw) has proved beneficial and, in spite of the relatively few cases of Tetanus the use of this 'triple Antigen' has a vogue.

Certainly in no disease more than in Tetanus is prevention better and more worth while than cure—especially as the cure of established Tetanus is extremely chancy.

The Triple Antigen is available to Doctors in the City on request or may be given at the Infant Welfare Clinics. The purpose of the combination is to avoid injections over and above those already necessary for protection against Diphtheria and Whooping Cough.

### (6) Poliomyelitis Vaccination

The scheme for Poliomyelitis Vaccination was accelerated by the arrival of 'untested' vaccine from Canada and U.S.A. (The term 'untested' meant that on arrival in this country the vaccine had not been subjected to the tests normally performed here. It was, of course, tested in the country of origin). There was still limitation of British supplies, and the operation of priorities, using varying types of vaccine and the necessity to keep Local Authority work on a level with that of the General Medical Practitioners, smade it very difficult to meet the demands and give satisfaction all round.

The co-operation of the General Medical Practitioners in the City was much appreciated and helped greatly to accelerate the programme.

Three doses of vaccine are now given, the third being delayed until seven months after the second.

In the very rare instances where Poliomyelitis occurred in vaccinated persons, special investigations were made. Extra staff were employed to cope with the clerical work necessary.

The incidence of Paralytic Poliomyelitis in the vaccinated is of course very much less than that in the unvaccinated, and it seems fair therefore to assume that the severity of the disease is similarly reduced in the vaccinated.

The position at the end of the year was:—

No. registered for immunisation					8948
No. who had three injections					2090
· · · · · · · · · · · · · · · · · · ·					
No. who had two injections	•••	• • •	•••	•••	6704
No. who had one injection	•••	•••	•••		124
No. awaiting					30

Notifications of and deaths from Poliomyelitis during the past years were as follows:—

Year		No. of Paralytic Cases	No. of Non-Paralytic Cases	Total	Deaths
1950		5	1	6	
1951		1	2	3	_
1952	•••••	2		2	_
1953		9	1	10	_
1954	• • • • • • • • • • • • • • • • • • • •	2	1	3	1
1955		5	1	6	1
1956		5	1	6	
1957		3	_	3	1
1958	• • • • • • • • • • • • • • • • • • • •	2	_	2	

### Antigens generally

The Committee considered the provision of combined antigens in relation to the risk of precipitating paralysis in Poliomyelitis Infection. All Doctors in the City were informed of the antigens which would in future be available to them, in the light of this knowledge.

### 6. AMBULANCE SERVICE (Section 27)

The City Ambulance Service provides a service for the adjacent areas of Cheshire and Flintshire, though in these areas, the County Services are gradually being strengthened.

The Staff consists of an Officer-in-Charge, 16 Driver/Attendants and one Telephonist, and the six vehicles are located in one Central Depot. The provision of a larger Depot with better storage, staff and garage and repair facilities was deferred for more pressing needs. This meant that the petrol supplies were still obtained from another Corporation Department, a handling charge being paid by the Health Department.

The emergency increase in staff—from 15 to 16 Ambulance Drivers—was made because of the difficulty in fulfilling the commitments of the Service.

### Radio Telephones

After a demonstration of Radio Telephones, a wide enquiry from other Local Authorities was made and the value of Radio Telephones on the Ambulances was assessed. It was decided to make provision for the purchase of Radio Telephone equipment in the Financial Year 1959-60, but at the time of writing this has not yet materialised. A practical test is being made over a period of three months.

### Conditions of Service

A review of the conditions of service and amenities at the Ambulance Depot lead to various alterations and some improvements at the Depot. Driving Licences are now provided by the Corporation for the Ambulance Drivers.

### **Vehicles**

The condition of the springing of the Ambulances was reported upon, especially for the transport of dangerously ill patients. It was decided to modify, as an experiment, the springing on one vehicle in order to give a softer and smoother ride.

The maintenance of vehicles was continued at the Transport Depot, with resultant high standard of reliability.

Appreciation must be voiced of the excellent co-operation with the General Medical Practitioners and the Hospital Staffs (Doctors and Almoners). It is becoming quite unusual for a useless Ambulance journey to be made; frequently two, or three weeks will pass without a single journey being unnecessary. This is the sort of economy we do welcome and it reflects great credit on those who use the Service.

It will be noted that the total mileage run by the Ambulances is increasing year by year.

		Total Number
	Total Miles	of Patients Carried
	64,685	 7,662
	64,221	 7,903
	66,065	 10,600
	73,250	 15,753
	82,396	 17,408
• • • • • • • • • • • • • • • • • • • •	83,227	 19,766
	86,554	 19,871
	86,779	 20,301
		 64,685 64,221 66,065 73,250 82,396 83,227 86,554

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		JOURNEYS	VEYS					PA	TIEN	PATIENTS CARRIED	RIE	Q					MILEAGE	AGE	
Authority	Ą.	s.	0.	O. Total	Si	(3)	her		(4) Sitting		Acc	(5) siden nerge	(5) Accident and Emergency	9	Total		£	88	
		(1) (2)	3		A.	s.	S. Total	Æ	S.	Total	A.	S.	A. S. Total O.	0.	(3 &4)	Α.	S.	0.	Total
City	1954	2678	746	1954 2678 746 4632	2378	-	2379	3846	10421	14267	538	4	582	5626	16646	26040	1 2379 3846 10421 14267 538 44 582 5626 16646 26040 40913 5508 66953	5508	66953
Cheshire		275 150		425	531	2	536	257	2730	5 536 257 2730 2987 202 23 225 2076 3523	202	23	225	2076	3523	7758	7758 10772 5237 18530	5237	18530
Flintshire	59	25		84	51 .		51	25	29	54	31	5	54 31 5 36		105	513	257	1	670
Other	11	11 11		22	12		12	12 2	13	15					27	338	188		526
Totals 2299 2864 751 5163	2299	2864	751	5163	2972	9	2978	4130	13193	17323	771	72	843	7702	20301	34649	6 2978 4130 13193 17323 771 72 843 7702 20301 34649 52130 10745 86779	10745	86779

NOTE: A.—Ambulance; S.—Sitting Casc Vehicle; O.—Occupation Centre.

Column 1 includes Column 2; Columns 3 and 4 includes Columns 5 and 6; Column 7 includes Column 8.

### 7. PREVENTION OF ILLNESS, CARE AND AFTER-CARE (Section 28)

### (i) Tuberculosis

The Assistant Chest Physician of the Regional Hospital Board at the City Hospital is employed on one session per week for Preventive and After Care Work. B.C.G. Vaccinations were done at the Chest Clinic.

The B.C.G. Scheme for vaccination of School Children was started during 1955. Details are given under the appropriate section.

A system of weekly cross-notification between the Health Department and the Chest Clinic (City Hospital) ensures continuity of preventive measures. There was close liaison between the Chest Clinic and the Health Department. One Health Visitor is appointed to attend at the Clinic and to visit tuberculosis patients in their homes. A great improvement in the liaison between the two centres is apparent.

I would like to thank the Doctors and Staff of the Clinic for their great help during the year. Preventive Tuberculosis work has been enhanced and has assumed a more concrete and purposeful form. It was easier also to assess the relative needs for rehousing of tuberculosis families and much greater activity in this field was possible.

Residential After Care at Wrenbury Hall (County Council) was provided and one patient was sent for convalescence.

Home Nursing equipment was available on loan, and the Council has provided a garden shelter in one case.

No. receiving B.C.G. Vaccination through Chest Clinic (including	
infants, 350)	548
No. of visits to patients by Health Visiting Staff	547
No. of patients assisted in T.B. Colonies	
No. of new contacts (City) examined at Chest Clinic	178
No. of these found to have Pulmonary Tuberculosis	12

Free Milk. The scheme continued and 7 households were provided with one pint of fresh milk daily free of charge. The cases were reviewed at each meeting of the Tuberculosis After Care Sub-Committee.

Mass X-Ray. A new scheme was inaugurated; one of the mobile Mass X-Ray Units of Liverpool Regional Hospital Board made a 'crash' visit to the City for a week, and, being situated in the Market Square, attracted a record number of the public. It was believed that by such visits, a higher percentage of the population would be attracted than by a longer stay in a site not quite so accessible. The figures given for the visit are:—

Females	•••	•••	•••	•••	* * *			
						T-4	-1	1347

### (ii) Blind Persons

The Chester and District Blind Welfare Society give the following data:

	On R	egister	New	Cases	Dea	aths
	M.	F.	M.	F.	M.	F.
Blind	35	60	2	7	2	6
Partially						
Sighted	5	12	2	3	1	1

### A.—Follow up of Registered Blind and Partially Sighted Persons

	C	Cause of Dis	ability Retrolental	
(i) No. of cases registered during year in respect of which para. 7(c) of Forms B.D.8 recommends:	Cataract	Glaucoma	Fibroplasia	Other
(a) No treatment	3		_	3
(b) Treatment (Medical Surgical or Optical	4	2	_	3
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	3	_	_	_

### B.—Ophthalmia Neonatorum

(i)	Total	number	of	cases	notified	during	the	year				• • •	Nil.
-----	-------	--------	----	-------	----------	--------	-----	------	--	--	--	-------	------

(ii) Number of cases in which:-

a. Vision lost

b. Vision impaired

Nil.

c. Treatment continuing at end of year

Blind Persons registered at the end of the year were as follows:—

			Blind	Partially Sighted
Adults	 	 	95	17
Children	 	 •••	2	3

Of the children one blind attends a Special School for the Blind and all three partially sighted attend Special Schools for the partially sighted.

### (iii) Epileptics and Spastics

Epileptic and Spastic children of school age are dealt with under the Education Acts.

One adult epileptic is maintained at a colony by the Welfare Committee. Four adult spastics are on the register, two of whom attend a handicrafts class and are transported by Ambulance.

### (iv) Illness Generally-Prevention and Care

The following local health authority services cater for cases of illness at home:—

- (a) Health Visitors
- (b) District Nurses
- (c) Domestic Helps

The difficulty of recruiting a full complement of Health Visitors has affected this service. We have employed Clinic Nurses to release Health Visitors for this important work and every effort was made to engage a full staff.

A Campaign against Accidents in the Home was started by the Nursing Staff, with Medical Practitioners, Public Health Inspectors and Domestic Helps.

### Nursing Equipment for Domestic Use

The Superintendent District Nurse was responsible for the issue and recall of various articles of nursing equipment and for the small hire charges made. This Service is supplimented by other items of equipment available from some Voluntary Organisations in the City. During 1958 altogether 192 articles were hired or loaned.

### 8. DOMESTIC HELPS (Section 29).

The Staff of Organiser, thirteen full-time Helps and 'Holiday' and 'Sickness' Relief was maintained. The number of chronic sick and aged sick and infirm put a severe strain on this Service and absorbed the greater part of it.

It will be realised that sons and daughters sometimes have great difficulty in looking after aged parents—especially when the houses are small—like all modern ones—and when the housewife goes—or has to go—out to work. Such a problem is bound to be an increasing one and it arises out of an increased expectation of life (an ageing population) sometimes from real and economic necessity.

Type of Case	No of Cases	Hours Worked
(a) Acute Illness	17	2871
(b) Maternity	32	1729
(c) Tuberculosis	_	
(d) Aged, Infirm and Chronic Sick	91	18846
(e) Mental Illness and Mental Deficiency	2	11
	1.40	
	142	23457

### HEALTH EDUCATION

Talks were given in the Infant Welfare Clinics to groups of mothers by Health Visitors. Pamphlets and posters were exhibited in the Infant Welfare Clinics, Dental Clinic and the Health Department.

Illustrated lectures to Food Handlers were given by the Staff during the year.

Members of the Staff of Public Health Inspectors and of Health Visitors undertook to give some lectures in the training course for Nurses at the Royal Infirmary.

### 9. MENTAL HEALTH

### **Administration**

The Staff employed consisted of the Medical Officer of Health, the Deputy and Assistant Medical Officer of Health (all three of whom are approved for the purposes of the ascertainment and certification of Mental Defectives), two part-time Duly Authorised Officers and such services of Health Visitors as were necessary. No Psychiatric Social Workers or Mental Health Workers are employed.

Patients on trial from Mental Hospitals and on leave or licence from Mental Deficiency Hospitals were supervised by the Authorised Officers, Health Visitors or, in special cases, by the Medical Officer of Health. Reports were received from the Mental Hospitals of patients on discharge therefrom.

No duties were delegated to Voluntary Organisations.

#### Lunacy and Mental Treatment Acts

The following numbers of Patients were dealt with:-

	Certi	ified	Volu	ntary	Sect.	20-21	No A	ction	After Visi	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
	7	12	81	121	30	27	8	6	29	92
Totals	 1	9	20	)2	5	7	14	4	12	1
Discharged	 2	5	48	81		_				
Died	 3	1	4	3	4	4				

#### The Duly Authorised Officers' Report

There were 22 occasions of attempted suicide.

The bed shortage remains acute, particularly in regard to female patients as shewn in the number of visits necessary prior to the vacancy becoming available.

#### The Mental Deficiency Acts, 1913-38:--

(i) Ascertainment of Mental Defectives is carried out by the Medical Officer of Health, the Deputy and Assistant Medical Officer of Health. In borderline cases, the policy, especially with children, has been to give them every opportunity for education (in special classes if need be) before reaching a final decision on their non-educability. After notification to the Local Health Authority, re-examination is carried out as an additional check. Particularly difficult cases are referred to the Regional Hospital Board's Consultant Psychiatrist who has special experience in such cases.

Statutory and Voluntary Supervision is the work of the Health Visitors, though special cases may be visited by the Medical Officers. The normal period for visits is three-monthly, though it will be appreciated that stable cases may only require visits annually, and difficult cases may require more frequent supervision. Certain of these visits may also be done by the Authorised Officers.

#### (ii) Guardianship

There were no Mental Defectives under Guardianship in the City of Chester.

#### (iii) Occupation Centre

Since the Occupation Centre was opened in 1953, there has been less opposition to the notification of children as 'ineducable' under the Education Act, and parents have more readily accepted their children's disability in the knowledge that something in the nature of 'schooling' or training is being provided. There will be a further increase of the care, in the community, of mentally defective and unsound persons when the recommendations of the Commission become operative; the provision of Hostels, Training Centres and Rehabilitation Units (or After Care Clubs) is envisaged with consequent easing of the pressure on hospital beds.

Attendance at the Occupation Centre has risen to a maximum of 50 per day, and further expansion is necessary to meet future needs. The site of the new Occupation Centre was settled—to be built in the area adjacent to Kenwyn, Dee Banks. This Centre will cater for 90 pupils at first and is capable of expansion. Adjacent counties will send their quotas of pupils, as now.

The transport of cases to the Occupation Centre was revised because of difficulties encountered, and it was decided to pick up the cases from various points in the City. This diminished the time taken by the vehicles.

A Sports Day for the pupils was held in the Cherry Grove playing field in July and was well attended by parents and representatives.

During the summer holiday, the staff of the Centre again took the pupils on two outings. Not all pupils can go—or are suitable so to be taken, but every effort is made to take as many as possible.

A Christmas Play and Sale of Work was again popular. Such functions need, of course, spacious accommodation, which unfortunately cannot be provided in the present premises.

#### Occupation Centre Pupils:—

*						
City Cases	•••	• • •	 • • •	 •••		27
Cheshire			 	 	• • •	7
Flintshire						16

#### (iv) Other Services-Short Term Care

There was increased provision of short term accommodation in the Mental Deficiency Hospitals by the Regional Hospital Boards. Parents found that their children who were very difficult to cater for at holiday time, could be sent to Hospitals for a few weeks, while they were able to go on holidays elsewhere. Such services are very much appreciated especially as the health of the parent—mother usually—suffers through having to give constant attention to a defective. We have noticed that when father has to care for the defective child at home, his opposition to Institutional care rapidly disappears.

#### NATIONAL HEALTH SERVICE ACT, 1946 MENTAL DEFICIENCY ACTS, 1913—1938

#### Local Health Services

		14	e	ar	ıd
ι.	Particulars of Cases reported during 1958	M.	F.	M.	F.
	(a) Cases ascertained to be defectives 'subject to				
	be dealt with'		_	_	_
	Number in which action taken on reports by:				
	(1) Local Education Authorities on children				
	(i) While at school or liable to attend				
	school	6	1	—	_
	(ii) On leaving special schools	_	_	—	—
	(iii) On leaving ordinary schools	_	_	_	_
	(2) Police or by Courts		_	_	_
	(3) Other sources	1	_	_	—
	(b) Cases reported who were found to be defect-				
	ives but were not regarded as 'subject to be				
	dealt with' on any ground	_		_	_
	(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b)				
	(d) Cases reported in which action was in-	_			
	complete at 31st December, 1958, and are thus				
	excluded from (a) or (b)			_	_
	in the contract from (a) or (b)				
	TOTAL	7	1		
2.	Disposal of Cases reported during 1958  (a) Of the Cases ascertained to be defectives  'subject to be dealt with' (i.e., at 1(a)),  number				
	(i) Placed under Statutory Supervision	6	1	_	_
	(ii) Placed under Guardianship	_	_	—	—
	(iii) Taken to 'Places of Safety'	_	_	_	_
	(iv) Admitted to Hospitals	1		_	_
	(b) Of the Cases not ascertained to be defectives				
	'subject to be dealt with' (i.e., at 1(b) ),				
	number				
	(i) Placed under Voluntary Supervision	_	_	_	_
	(ii) Action unnecessary	_	_		_
	TOTAL	7	1		
a	Number of Mental Defectives for whom care was tranged by the Local Health Authority under Circular 5/52 during 1958 and admitted to:  (a) National Health Service hospitals	1		_	_
	(b) Elsewhere		—		
	TOTAL	1			
	A O THE				

4. Total Cases on Authority's Registers at 31/12/58			•	
(i) Under Statutory Supervision	12	10	29	33
(ii) Under Guardianship (iii) In 'Places of Safety'				
(iv) In Hospitals	5	3	27	22
(v) Under Voluntary Supervision	_	_	10	11
	17	12		
TOTAL	17	13	66	66
5. Number of defectives under Guardianship on 31st December, 1958, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913. (Included in 4(ii))	_	_	_	_
6. Classification of defectives in the Community on 31/12/58 (according to need at that date)  (a) Cases included in 4(i)—(iii) in need of hospital care and reported accordingly to the hospital authority:—				
(1) In urgent need of hospital care:—	,			
(i) 'Cot and Chair' Cases	1		1	1
(ii) Ambulant Low Grade Cases (iii) Medium Grade Cases	_	_		
(iv) High Grade Cases	_	_	1	_
Total Urgent Cases	1		2	
(2) Not in urgent need of hospital care:— (i) 'Cot and Chair' Cases (ii) Ambulant Low Grade Cases (iii) Medium Grade Cases	1 1 —	1	2 2 3	
(iv) High Grade Cases	_	_	_	_
		<u> </u>	<u> </u>	3
(iv) High Grade Cases  Total Non-Urgent Cases				3 4
(iv) High Grade Cases  Total Non-Urgent Cases  Total of Urgent and Non-Urgent Cases  (b) Of the Cases included in items 4(i), (ii) and			7 9	
(iv) High Grade Cases  Total Non-Urgent Cases  Total of Urgent and Non-Urgent Cases				
Total Non-Urgent Cases  Total of Urgent and Non-Urgent Cases  (b) Of the Cases included in items 4(i), (ii) and (v), number considered suitable for:—  (i) Occupation Centre  (ii) Industrial Centre		1 7 —	9 15 3 2	13 1
Total Non-Urgent Cases  Total of Urgent and Non-Urgent Cases  (b) Of the Cases included in items 4(i), (ii) and (v), number considered suitable for:—  (i) Occupation Centre  (ii) Industrial Centre  (iii) Home Training  TOTAL  (c) Of the Cases included in 6(b), number receiving training on 31/12/58:—  (i) In Occupation Centre  (ii) In Industrial Centre from a Home Teacher (in groups)	7	1 7 —	9 15 3 2	13 1 2
Total Non-Urgent Cases  Total of Urgent and Non-Urgent Cases  (b) Of the Cases included in items 4(i), (ii) and (v), number considered suitable for:—  (i) Occupation Centre  (ii) Industrial Centre  (iii) Home Training  TOTAL  (c) Of the Cases included in 6(b), number receiving training on 31/12/58:—  (i) In Occupation Centre  (ii) In Industrial Centre from a Home Teacher (in groups)  (iii) from a Home Teacher at home (not	7 7	7 	9 15 3 2 20	13 1 2 16
Total Non-Urgent Cases  Total of Urgent and Non-Urgent Cases  (b) Of the Cases included in items 4(i), (ii) and (v), number considered suitable for:—  (i) Occupation Centre  (ii) Industrial Centre  (iii) Home Training  TOTAL  (c) Of the Cases included in 6(b), number receiving training on 31/12/58:—  (i) In Occupation Centre  (ii) In Industrial Centre from a Home Teacher (in groups)	7 7	7 	9 15 3 2 20	13 1 2 16

#### NATIONAL ASSISTANCE ACT, 1948

No cases were compulsorily removed in 1958.

Several cases were investigated and the subjects were persuaded to accept the appropriate accommodation.

Much has been written about the pro's and con's of compulsory removal of aged and enfeebled persons from their homes, and in its present state the Act gives some grounds for the criticism of 'barbarity'.

#### MEDICAL EXAMINATIONS

#### (1) Residential Nurseries

The Medical Officers carried out routine examinations of the children in Kingston House (Children's Department) and of those in the Children's Home, Eaton Park View, on admission, discharge and special occasions.

Both the homes come under the care of the Child Care Committee.

#### (2) Superannuation Examinations

Staff of all Corporation Departments were examined by the Medical Officers for the purpose of determining their fitness for (a) Employment, (b) Entry into the various Sickness Pay Schemes, (c) Entry into the Corporation Superannuation Scheme.

In the case of Staff associated with school children, the examinations have included X-Ray of chest (usually done at the Mass Radiography Unit) and for teachers in the Education Department, full reports on Forms 4 R.T.C. and 28 R.Q. were made.

The number of examinations in the year was 423 and for comparison with previous years:—

1952: 204 1953: 338 1954: 412 1955: 431 1956: 484 1957: 465

## THE DOMICILIARY HEALTH SERVICES FOR THE AGED SICK AND INFIRM

(Ministry Circular 14/57)

An increase in the staff of Domestic Helps has enabled more help to be given to cases at home. There is provision for a Night Sitter Service and for extra help during holiday and sickness. A Laundry Service for the aged infirm at home was considered.

The District Nursing Service has also been increased slightly to cope with the aged infirm, and a better system of night service introduced. A 24 hour service is provided.

There has been close liaison between the Hospitals, through their Consultant Geriatrician, and the Health Department, through the Health Visitors. This has undoubtedly helped to eradicate compulsory removal to Hospital under the National Assistance Act.

# WATER

The City water supply is drawn from the River Dee and supplied by the Chester Waterworks Company. The water is filtered and chlorinated at the Company's works.

The standard of purity has been maintained during the year, the water being graded 'Class I'.

Bacteriological examinations of the water supply including water from various filter beds have been carried out twice a month. In addition, chemical analyses of water from a consumer's tap have been carried out by the Public Analyst every month, and the following table gives the result of these analyses, which are shown in parts per million of water.

# CHEMICAL EXAMINATION OF CITY WATER SUPPLY

Parts per Million	Jan.		eb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	
Total Solid Matter in Solution	180.0	(1	20.02	220.0	240.0	240.0	240.0	240.0	160.0	160.0	180.0	180.0	240.0	
Nitrogen in Nitrates	1.5		1.0	1.5	2.0	2.0	1.0	1.5	1.5	0.15	1.0	1.5	2.0	
Nitrites	Ξ :	:=	ΞZ	ΪΖ	Ë	Ξ̈́Z	ΪΖ	ΙΪΝ	Ν̈́Ξ	ïZ	ïZ	Ν̈́Ξ	Ϊ́Ν	
Chlorine in Chlorides	20.0		24.0	23.0	30.0	41.0	19.0	26.0	22.0	18.0	14.0	22.0	36.0	
Oxygen absorbed from Permanga-	-a-													
nate in four hours at 80°F.	ŏ	89	0.64	0.56	0.48	0.56	0.44	0.48	0.52	09.0	0.76	0.64	0.72	
Free and Saline Ammonia .	Ξ :	Ξ̈́	ïZ	ΪŻ	ΞZ	ΪŻ	Ξ̈́Z	Ϊ́Ν	ΪΖ	ïZ	Ϊ́Ν	Nii	Ξ̈́Z	
Albuminoid Ammonia	<u>.</u>	05	0.04	0.05	0.04	90.0	0.03	0.04	0.03	0.04	90.0	0.04	0.05	
Lead, Copper, Zinc	ïZ :	:=	ΪŻ	ΪΖ	ΞZ	ΞZ	ΪŻ	ΪΝ	Ξ̈́Z	ïZ	ΪŻ	ΪΖ	ΪΖ	
Microscopical Examination	of													
Sediment	Ξ :	:=	ΞZ	ΞZ	ΞZ	ΪŻ	ΞZ	ΪΝ	ΞZ	ΞZ	ΞZ	ΪΝ	ΞZ	
Temporary Hardness	.: 40.	Ŭ	20.0	65.0	85.0	95.0	37.5	65.0	20.0	35.0	40.0	20.0	95.0	
Permanent Hardness	37.0	` '	27.0	38.0	0.09	58.0	25.5	49.0	35.0	25.0	29.0	40.0	9.99	
PH Value	7.		7.2	7.1	7.1	7.3	6.9	7.0	7.0	6.9	7.0	7.0	7.1	
Residual Free Chlorine	0.	0.04	0.04	0.05	0.05	90.0	0.05	0.04	0.04	0.05	0.04	0.05	90.0	

#### Chief Public Health Inspector's Report 1958

#### INSPECTION OF AREA

ENVIRONMENTAL HYGIENE					
Complaints received—Dwellings					843
Complaints received—Other Premis				•••	143
Visits in respect of Complaints—Dv					1750
Visits in respect of Complaints—On	_			•••	344
1					
Dwellings:—					
				Inspections	
(a) Nacifiakla Diagona		Fir		Sbsqnt.	Total
(a) Notifiable Diseases	•••	28		6	34
(b) Food Poisoning Visits	•••	2:		73	94
(c) Defects and Repairs	•••	439		1871	2310
(d) Certificates of Disrepair, etc.	•••	6		76	143
(e) Overcrowding	•••		4	3	7
(f) Prospective Corporation Tenants	•••	4		7	51
(g) Vermin	•••	39		22	61
(h) Dustbins	•••	18		20	38
(i) Other Purposes		13:		126	261
Houses in Proposed Clearance Area	s, visits	and ins	specti	ons	776
Common Lodging House, visits	• • •	•••	•••	•••	16
Factories, visits		•••		•••	96
Shops Act, inspections	•••	•••		•••	673
Schools, inspections	•••	•••	•••	•••	5
Smoke Abatement, observations, etc			•••		62
Complaints of Smoke Nuisances		•••	• • •	•••	5
Licensed Premises, inspections	• • •	•••	• • •	•••	181
Offices, inspections	• • •			•••	71
Other Business Premises (excluding	Factori	es)		• • •	49
Offensive Trades				•••	2
Canal Boats, inspections					2
Tents, Vans and Sheds, inspections		• • •		•••	12
Rag Flock Premises, visits				• • •	4
Pet Shops				• • •	12
Brooks and Streams, inspections			•••	•••	27

Open Ground and Common Passages, inspec	tions			50
Rats and Mice Destruction, visits	•••			4786
Drainage Work:—				
(a) No. of premises involved				619
(b) Inspections				1397
(c) Tests applied				215
Premises disinfected after infectious diseases				5
Premises disinfested for vermin				4
Prospective Corporation tenant's houses	disinf	ested	for	
vermin	•••	•••	• • •	4
FOOD HYGIENE, ETC.				
Inspections of Restaurants and Cafes				106
Inspections of Hotels (Catering)				66
Inspections of Canteens				27
Inspections of Dairies, Milk Shops, etc.				140
Inspections of General Provision Shops				391
Inspections of Butchers' Shops				129
Inspections of Bakehouses	•••			26
Inspections of Fishmongers				20
Inspections of Greengrocers	•••	•••		36
Inspections of Ice Cream Premises	•••			83
Inspections of Public Market	•••	•••		10
Inspections of Fish and Chip Shops	•••			31
Inspections of Other Food Premises	•••	•••		297
ADMINISTRATION				
(a) Number of letters sent re nuisances				775
(b) Number of Preliminary Notices served				137
(c) Number of Statutory Notices served				63
(d) Legal Proceedings in default				2
771 · · · · · · · · · · · · · · · · · ·				

The majority of nuisances are remedied by informal action and the cooperation of those concerned.

#### SECTION 92 PUBLIC HEALTH ACT, 1936 ABATEMENT OF NUISANCES

#### Legal Proceedings

#### Cases 1 and 2.

Hearings postponed 28 days on payment of costs and later withdrawn on completion of work.

#### HOUSING

During the year, 212 houses were dealt with under the Housing Acts, as follows:—

(1) 23 individually unfit houses were closed or demolished by action under Sections 16 and 17 of the Housing Act, 1957.

			0			
(a) Closed						
11, New Crane Str	eet					(Undertaking)
7, Bedward Row						(Undertaking)
8, Bedward Row		• • •	• • •	• • •	•••	(Uudertaking)
9, Bedward Row	• • •	• • •	• • •	• • •		(Undertaking)
10, Bedward Row	• • •	• • •	• • •	• • •	• • •	(Undertaking)
11, Bedward Row	• • •	•••		• • •	• • •	(Undertaking)
20, Canal Side	•••	• • •	•••	• • •	• • •	(Undertaking)
135, Boughton		• • •		• • •	• • •	(Undertaking)
Devonia Cottage, I	Blacon	•••	•••	•••	•••	(Undertaking)
18, Canal Side	• • •	•••	• • •	• • •	•••	(Undertaking)
19, Canal Side	1. 701	• • •	• • •	•••	• • •	(Undertaking)
4, Clares Court, Ou		ace	• • •	•••	• • •	(Undertaking)
101, Christleton Ro		•••	• • •	• • •	• • •	(Undertaking)
		• • •	• • •	•••	• • •	(Closing Order)
3, Bollands Court, V			• • •	• • •	• • •	(Undertaking)
			• • •	• • •	•••	(Undertaking)
10, Wrenches Cour		n Road	• • •	•••	• • •	(Undertaking)
53, New Crane Stre	eet	•••	•••	•••	•••	(Undertaking)
	• • •	• • •	• • •			(Undertaking)
7, Canal Side	• • •	• • •	•••	•••	•••	(Undertaking)
(b) Demolished						
51, Orchard Street					(De	emolition Order)
163, Saughall Road						
165, Saughall Road						
, ,	•					

#### SLUM CLEARANCE

The following areas have been represented and confirmed during the year:—

(a) Areas Represented and C	Confirm	ed		No	. of Houses
William Street Area			 		62
Trafford Street Area		• • •	 		29
George Street Terrace A	rea	• • •	 		5
					96
(b) Areas Represented 1958					<del></del>
Pitt Street, No. 2 Area (Co	onfirme	d 1959)	 		27
Oulton Place Area (Not y					66
					02
					93

#### RENT ACT, 1957

67 investigations of applications for Certificates of Disrepair and Revocation etc. under the above Act were carried out by the Public Health Inspectors during 1958.

#### ATMOSPHERIC POLLUTION

The provisions of the Clean Air Act 1956 became operative during the year.

During 1958 the survey of industrial chimneys and plant was continued and 62 smoke observations carried out.

Five complaints of smoke nuisances were investigated. They concerned emissions from chimneys of five premises. Three of the plants have now been converted to oil burning and are operating satisfactorily. Overhaul of plant, fuel and firing in the other two instances was carried out with favourable results.

Due to staff shortages and the large amount of time being devoted to Slum Clearance, Food Inspection, Food Hygiene, etc., it has not been possible to carry out as much work under the Act as we would wish. The work would entail large detailed surveys of domestic and other property with a view to establishing smoke control areas.

During the year the new 300 feet chimney at the Leadworks was completed and in use. Seven complaints of smell and fumes were received, all of them between 17th October and 10th November. The complaints were referred to the Works Manager and The Inspector of Alkali Works, etc.

Monthly reports were submitted to the Health Committee.

#### CANAL BOATS

The number of boats using the canal has continued to fall.

Only two boats were examined during 1958 and neither required the service of complaint notes.

#### COMMON LODGING HOUSE

There is only one privately-owned Common Lodging House (males only) licensed by the City Council.

Sixteen surprise and routine inspections have been made and several sanitary improvements have been carried out on request and under supervision.

#### RODENT CONTROL

Under the scheme of the Ministry of Agriculture and Fisheries, a consolidated grant of 50 per cent. of the approved net expenditure, incurred during the financial year 1957-58, is made to Local Authorities. Certain conditions relating to organisation, employment methods, staffing and the carrying out of effective procedure have to be complied with to the satisfaction of the Ministry.

Corporation sewers, surface properties and private houses are treated free of cost. Grant aid is not available in respect of expenditure incurred by the treatment of commercial or industrial premises, the costs being fully re-imbursed by the occupiers so that no charge falls on public funds.

Rodent control in Corporation sewers has continued, two 'maintenance' and one 'test bait' treatments being carried out during the year.

The results of these treatments are shown in the following tables:—

Sewer Maintenance Treatment No. 2/57/58. 18th February to 18th March, 1958.

Manholes treated	Pre	bait ta	akes (	(1)	Pre	bait t	akes	(2)		Poiso	n take	en	Rats destroyed
	C.	G.	S.		C.			N.	C.		S.	N.	
427	105	87	68	167	88	75	82	182	_	26	176	225	423

Bait base: Bread mash plus Poison-Arsenic

C—Complete take.

G—Good.

S—Small.

N-No take

## Sewer Test Baiting July, 1958

No. of Manholes tested		Result	
	C.	Partial	No take
181	4	1	176

Test baiting with damp sausage rusk was applied in the areas of the City having modern piped sewers, as from practical experience the old sewers of the City are known to be rat infested.

# Sewer Maintenance Treatment No. 1/58/59. 25th August to 29th September, 1958.

Manholes treated	Pre	bait t	akes	(1)	Pı	rebait	takes	(2)	I	Poisor	ı taker	n	ts destroyed
¥35	<b>C.</b> 123	<b>G.</b> 76		<b>N.</b> 180	<b>C.</b> 103	<b>G.</b> 85	<b>S.</b> 63	<b>N.</b> 184	<b>C.</b>	<b>G.</b> 39	<b>S.</b> 162	<b>N.</b> 234	Rats

Bait base:— Sausage rusk plus Poison—Zinc Phosphide.

There is little doubt that effective treatment of the sewers reduces the complaints from surface properties. In built-up areas such infestations are usually traced to defective drains and the complaints are remedied following repairs.

The sewers and Corporation refuse tips remain the major source of infestation in the City. The tip, sewage works and land adjoining are kept under routine observation and received 14 treatments during the year.

The rodent staff (one Foreman and two Operators) are engaged for a total of approximately three months annually in the treatment of sewers, sewage works and refuse tips alone.

4,786 visits were also made by this staff and Public Health Inspectors to surface properties during the financial year ended 31st March, 1959.

Estimated total of vermin destroyed: Rats—5,260; Mice—2,884.

The result of searches, complaints and the services to premises in the City is shown in the following table:—

RODENT CONTROL—Report for 12 months ended 31st March, 1959

		NON-AGR	NON-AGRICULTURAL		
TYPE OF PROPERTY	Local Authority	Dwelling Houses	All Other (including Business Premises)	Total	AGRI- CULT- URAL
I.—Total number of Properties in Local Authority's			r remises)		
District	125	18030	2992	21147	17
II.—Number of Properties inspected as a result of:—					
(a) Notification	45	235	90	370	m
(b) Survey under the Act	18	343	182	543	∞
(c) Otherwise	2	21	6	32	1
IIITotal Inspections carried out (including re-					
inspections)	542	3649	561	4752	34
IV.—Number of Properties inspected (in Section II)					
(a) Rats—Major	13	n	2	18	2
Rats-Minor	20	330	46	396	ı
(b) Mice—Major	19	38	6	99	1
Mice—Minor	∞	64	30	102	1
V.—Properties in Section IV treated by Local Authority	46	420	99	532	8
VI.—Total Treatments (including re-treatments)	09	435	82	577	m
VII.—Notices served under Section 4 of the Act	Nii.	Nii.	Nii.	Nii.	Nii.
VIII.—Cases of Default	N. I.	Nii.	Nii.	N.ii.	Nii.
IX.—Legal Proceedings	Nii.	Nii.	Nil.	Nii.	Nii.
X.—'Block' Control Schemes carried out			57		

# RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

The above mentioned Act has been in operation since 1st November, 1951, and repealed the Rag Flock Acts of 1911 and 1928. Its purpose is to secure the use of clean filling materials in upholstered articles or other articles which are stuffed or lined.

The Act requires the licensing of premises where filling materials are used for upholstering, stuffing or lining of bedding, toys or baby carriages, but unfortunately, excludes premises where these articles are remade or reconditioned.

Four visits were made to premises within the City and one received a licence, under the Act.

#### LECTURES &c.

The Chief Public Health Inspector has addressed various organisations during the year e.g. Rotary Club, English Speaking Union, Professional Womens Guild, Church Study Circles, Youth Clubs &c. on such subjects as Public Health and Hygiene, Food Hygiene, Atmospheric Pollution &c.

He has continued as lecturer in Environmental Hygiene to nurses in training at the Chester Royal Infirmary and also as Examiner for the qualifying certificate of the Public Health Inspectors' Education Board.

#### THE MILK AND DAIRIES REGULATIONS, 1949

The following are premises from which milk is sold wit	hin the	City:-	_
Premises registered as Dairies			5
Purveyors and Shopkeepers with premises in the City			69
Purveyors with premises outside, retailing in the City	•••		11
	TO	TAL	85

# MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1949

The following licences were issued for the sale of designated milk within the City during the year ended 31st December, 1958:—

ne City during the year ende	ed 31si	t Decen	nber, 19	958:		
(a) Pasteuriser's Licence			•…		 	1
(b) Dealer's Licences:—						
(i) T.T. Milk					 •••	34
(ii) Pasteurised Milk				•••	 	76
(iii) Sterilized Milk	• • •			•••	 •••	10
(c) Supplementary Licence	s:—					
T.T. Milk					 	5

# THE MILK (SPECIAL DESIGNATIONS) (SPECIFIED AREAS) ORDER, 1955

Chester became a specified area during 1955.

Milk sold by retail must only be specially designated milk, i.e., pasteurised, sterilized or tuberculin tested.

The sale of undesignated milk is prohibited.

#### FOOD HYGIENE REGULATIONS, 1955

The Chief and Deputy Chief Public Health Inspectors have continued to give lectures and demonstrations on the principles of hygiene and the dangers involved in the neglect of personal and kitchen hygiene to staffs of food premises and numerous organisations.

The recording and detailed inspection of food premises was continued during the year.

On initial inspection, the premises were classified according to (a) suitability of premises, (b) type and condition of equipment, (c) methods employed and (d) general standards of hygiene.

Initial inspections for this purpose numbered 27 and re-inspections 341.

Where necessary, the attention of proprietors and management was called by interview and letter to defects, etc., requesting co-operation in order to advance the grading classification of these premises.

Such co-operation has been willingly given, resulting in a marked improvement in the standard without need for statutory action.

The work carried out included:—

- (i) Repairs to walls, ceilings, floors, doors and windows, etc.
- (ii) Painting of walls, ceilings and woodwork.
- (iii) Provision of adequate ventilation and lighting.
- (iv) Removal of refuse, etc., and regular cleaning of premises.
- (v) Personal cleanliness, overalls, etc.
- (vi) Provision of wash basins, sinks, and hot and cold water supply, soap and clean towels.
- (vii) Food storage, accommodation and refrigerators.
- (viii) Provision of sanitary accommodation.

The following table gives the state of classification of food premises inspected and re-inspected to the end of 1958 since commencement of the scheme:—

(	Classification on I	First Classific	cation of same
	Inspection	premise	s at end of 1958
Excellent	64		80
Good	237	•••••	327
Fair	216		180
Poor	140		78
Bad	20		12
	<del></del>		
TOTAL	LS 677		677

**NOTE.**—Excellent means first class in all respects, Good means minor defects only, Fair means few small defects in structure, equipment or methods, Poor means below standard generally and Bad means very unsatisfactory.

The 12 premises classified 'bad' were being satisfactorily dealt with early in 1959. Two had closed down, one had changed hands and one rebuilt.

The following is a list of the food premises in the City:—

Type	Number	Type N	umber
Bakehouses	17	Ice Cream Wholesale Depots	1
Brewery		Kiosks	7
Butchers' Shops	71	Licensed Victuallers	104
Cake Shops	21	Wholesale Meat Depots	3
Cheese Factors	2	Mineral Water Manufacturers	2
Dairies	5	Restaurants and Cafés	76
Egg Packing Station	1	School Kitchens, Canteens and	
Fishmongers	18	Meal Centres	30
Fried Fish and Chip Shops	29	Slaughterhouses	1
General Stores	21	Sweet Manufacturers	2
Greengrocers	54	Sweet Shops	4
Grocers and Provisions	126	Tripe Shops	1
Hotels	27	Wholesale Grocers	5
Ice Cream Manufacturers	6	Works and Stores Canteens	20

#### FOOD AND DRUGS ACT, 1955—SECTION 16

The following are registered in the City for:—

		ber of
	Premises	Inspections
(a) The sale, manufacture for sale, or storage of ice cream intended for sale	214	83
(b) The preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale	36	26

#### FOOD POISONING—INVESTIGATIONS

The Public Health Inspectors made 94 investigations and re-visits to suspected cases notified to the Medical Officer of Health, and collected 56 specimens for bacteriological examination in connection with same.

#### ICE CREAM

#### Chemical Analysis

The Food Standards (Ice Cream) Order 1953 provides that ice cream must contain at least 5 per cent fat, 10 per cent. sugar and  $7\frac{1}{2}$  per cent. milk solids other than fat. The standard applies to any products (including those supplied in catering establishments) which are sold as 'ice cream' or 'ices', but does not apply to water ices sold as such or to 'ice lollies'.

The fat content of the ten samples analysed is shown in the following table:—

#### FAT CONTENT PER CENT.

Standard 5 per cent	6 and under 7		8 and under 9		10 and under 11	11 and under 12	12 and over
Number of Samples	 1	1	_	_	3	_	5

The samples also satisfied the tests for sugar content and milk solids other than fat.

#### **Bacteriological Samples**

#### Ice Cream (Heat Treatment) Regulations 1947—51

During the year, 40 samples of ice cream were bacteriologically examined by the Public Health Laboratory Service, Hamilton Square, Birkenhead.

The following table sets out the results:-

	Numi	per of Samples
Grade 1—Satisfactory		36
Grade 4—Unsatisfactory		4
	TOTAL	40

Subsequent samples taken following the Grade 4 samples were reported to be satisfactory. No further action was necessary in these cases.

There were 6 samples containing Faecal B. Coli in ice cream from four producers. The Plants, etc. were sterilized and methods examined. Follow up samples were free from the organism.

All the premises etc. on which ice cream was manufactured, stored or sold were regularly inspected and the condition of utensils, methods, etc. found to comply with the requirements of the Ice Cream (Heat Treatment) Regulations.

#### LICENSED PREMISES

181 visits were made to licensed premises and a comprehensive report submitted to the Licensing Justices. The premises were also inspected regarding their compliance with the Food Hygiene Regulations, 1955.

Special attention has been directed to hygiene and the provision of sanitary accommodation. Particular attention has also been paid to the condition of beer cellars, especially in regard to the type and condition of piping from barrel to pump, cleanliness, structural condition, ventilation and drainage of floor and, where necessary, repairs and alterations have been carried out on request.

No complaints were received regarding unclean drinking utensils, etc. but this gives no room for complacency.

The generally high standard of hygiene in licensed premises within the City was maintained.

#### FOOD AND DRUGS ACT, 1955

The following tables show (1) the samples submitted to the Public Analyst (H. Lowe, Esq., M.Sc., F.R.I.C.) during the year and (2) the administrative action taken in respect of samples certified to be not genuine.

ART	ICLE		Numb	er Exam	nined	Number	Adultera	ted, etc.
			Formal	Informal		Formal	Informal	
			Fo	Inf	Total	For	Inf	Total
Milk		•••	21	49	70	1	1	2
Ice Cream Ice Lollies	•••	•••		· 10	10	_	_	
Beer				6	7 6			_
Whisky	•••		2	_	2			
Tea			_	3	3	_	_	_
Meat Paste		•••	_	3 2 2 2	2		_	_
Imported Apples Pork Sausages		•••		2	2 2	_	_	_
Margarine			_	í	1			
Salad Dressing			_	ī	ī	_	_	_
Self Raising Flou	ır	•••		1	1	_	_	_
Desiccated Cocor Lard		•••	_	1	1	_		_
Piccalilli	•••	•••		1	1	_	_	_
Bisto	•••		$\equiv$	i	i			
Pickled Onions			_	ī	ī			_
Crumpets	• • • •	•••	_	1	1	_	_	_
Hamburgers Pancake Mixture	• • • •	•••	_	1	1		_	, <del>-</del>
Milk Shake Cord		•••	$\equiv$	1	1		_	_
White Sliced Loa		• • •		î	î			
Scone Mix			_	1	1	_	_	
Butter			_	1	1	_	_	_
Coffee and Chi Sliced Wheatmea	cory Es			1	1	_	_	_
Syrup of Figs		•••	_	1	1	_	_	_
Lemonettes (swe	ets)		_	î	î	_	_	_
Liver Pills	•••	•••		1	1	_		_
Beef Sausages Marmalade	•••	•••	_	1	1	_	_	_
Jelly		•••	_	1	1 1	_	_	_
Flavouring	• • • •	•••	_	î	i	_		_
Blancmange	•••		_	1	ī		_	_
Salmon Spread		•••	_	1	1	_	_	_
Icing Peanut Butter	•••	•••	_	1	1		_	
Lemon Curd	•••	• • •		1	1			_
Stuffing	•••			î	î	_		
Double Cream	•••		_	1	1	_	_	_
Orange Drink Sauce	•••	•••	_	2	2		_	_
Malt Vinegar	•••	• • •	1	1 1	1 1	_	_	
Plain Flour	•••			i	1			
Lemonade			_	ī	ī		_	_
Strawberry Jam			_	1	1	_	_	_
Tomato Ketchup Bread	•••	•••	_	1	1	_		—
White Pepper	•••	•••		1	1 1			
Fruit Malt Loaf	•••	•••	_	î	i			
Tomato Soup	•••	•••	_	1	1	_	_	_
Gravy Browning Mustard	•••	•••	—	1	1	_	_	_
Milk Loaf	•••	• • •		1	1			_
Cake Mix		•••	_	1	i			_
Pastry Mix			_	1	1	_	_	_

#### TABLE I. ANALYSES—Continued

ARTICLE	Nu	ımber Exa	mined	Number	Adultera	ted, etc.
	Formal	Informal	Total	Formal	Informal	Total
Garden Peas	. —	1	1	_	_	_
Cornish Pasties  Doughnuts with Synthetic	_	1	1	_	_	_
Cream	_	1	1	_	_	_
Pickled Beetroot	_	î	î	_	_	_
Cocoa	_	ī	ī	_	_	_
Vinegar	. —	ī	ī		_	_
Dried Peas		1	1		_	_
Epsom Salts	_	1	1	_	_	_
Kipper Fillets	_	1	1	_	_	_
Manx Kippers	_	1	1	_	_	_
Crabmeat	_	1	1	_	_	_
Mallow Creams	_	1	1		_	
Apple Pie		1	1	_	_	_
Dripping	_	1	1	_		_
Popcorn	_	1	1	_	_	
Pompoms	_	1	I I	_	_	_
Pickled Red Cabbage	_	Ţ	Ţ	_	_	_
Onion Soup		1	1			
TOTALS	23	147	170	1	1	2

# FOOD AND DRUGS ACT, 1955

# TABLE II.

Table showing administrative action taken in regard to samples certified to be not genuine.

Sample No.	Article	Result of Analyses	Action taken
Formal 18	Milk	$2\frac{1}{2}$ per cent. deficient in fat on standard of 4 per cent. for Channel Islands Milk	Warning letter sent to the Producer
Informal 142 Milk	Milk	Calculated on the standard of 8.5 per cent. solids not fat, this sample contains 66 per cent. added water	Warning given to Pasteuriser and wholesaler and arrangements made to prevent future error. Follow up sample (No. 143) reported genuine

#### MILK

#### Chemical Analysis

Total Samples analysed				 	70
Number certified 'not genuine'				 	2
Samples below standard for fat				 	1
Samples below standard for solids	not fa	t and fa	at	 	1

#### **BACTERIOLOGICAL EXAMINATIONS**

Results of the various tests applied to 174 samples of milk submitted for examination are shown in the following table:—

Designation	No. of Samples	Test Applied	Nun Passed	nber Failed
Pasteurised	47	Phosphatase Methylene Blue	47 47	=
Certified T.T	91	Methylene Blue Coliform	86 91	5 —
T.T. Pasteurised	25	Phosphatase Methylene Blue	25 25	=
Sterilized	11	Turbidity	11	-

#### NOTES:--

- (a) The 'Phosphatase Test' denotes efficient pasteurisation.
- (b) The 'Methylene Blue Test' assesses keeping qualities.
- (c) Presence of coliform bacillus indicates faecal contamination.

The attention of the Producers and where necessary the Ministry of Agriculture and Fisheries was called to the unsatisfactory samples. Subsequent samples passed the appropriate tests.

#### **BIOLOGICAL EXAMINATIONS**

#### (a) For Tuberculosis

28 samples of T.T. Milk were sent to the Medical Research Laboratory, Birkenhead, for examination for the presence of tuberculosis of bovine origin.

All were certified to be negative.

#### (b) For Brucella Abortus

		Res	ults	
No of Samples Examined 28	Ring Positive	Test Negative	Positive	G.P.I. Negative
(T.T. Milk)	4	24	_	4

The above four Ring Test positive results occurred in four separate dairy herds. Guinea pig inoculation tests are carried out when samples are found to be Ring Test positive, in order to confirm the presence of the brucella.

The Local Authorities of the Areas of source of production in respect of four Ring Test positive cases were notified and took samples at the farms. Subsequently the guinea pig inoculation tests in respect of these cases were certified to be negative.

#### PET ANIMALS ACT, 1951

The Act, which came into operation on 1st April, 1951, regulates premises on, and conditions under which, pets are housed and sold.

Five premises were licensed under the Act and 12 re-inspections made during the year. All the premises complied with the terms of their licences.

Legislation is still necessary to control more effectively the sale of unfit meat in Pet and other such Shops, to ensure that it cannot be used for human food.

#### SLAUGHTER OF ANIMALS ACTS

Ten renewal licences were issued to Slaughtermen during the year. No new licences were applied for.

Slaughtering in the City has been carried out at the Public Abattoir. There are no private slaughterhouses.

Animals slaughtered during 1958:—

Cattle Calves Sheep Pigs	•••	 	•••		3000 370 10945 2503
			ТО	TAL	16818

Meat marking is carried out at the Abattoir where a Meat Inspector is on duty whilst slaughtering is in progress.

Ante-mortem inspections are made of all animals and notes taken of any abnormalities which might assist in the subsequent post-mortem examinations carried out on every animal slaughtered.

The weight of food condemned during the year amounted to:—

			Tons	Cwts.	Qrs.	Lbs.
Meat and offals	 		15	6	2	12
Other foods	 •••	•••	11	3	2	15
	ТО	TAL	26	10	_	27

All condemned meat is 'dyed green' before removal to an approved processing plant to ensure that it cannot be used for human consumption.

The following tables show (1) percentage of animals affected with disease and (2) details of all food condemned.

TABLE I.

CARCASES AND OFFAL INSPECTED AND CONDEMNED IN

WHOLE OR IN PART

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs
Number killed Number inspected	. 2759 . 2759	241 241	370 370	10945 10945	2503 2503
Number hispected	. 2/37	241	370	10743	2505
All Diseases except Tuberculosi	S				
and Cysticerci Whole carcases condemned	_		11	3	1
Carcases of which some par			• •	3	Î
or organ was condemned		78	2	2059	553
Percentage of the number in spected affected with disease					
other than Tuberculosis &	Ż				
Cysticerci	. 39.39	32.36	3.51	18.84	22.13
Tuberculosis only					
Whole carcases condemned		-	1	_	4
Carcases of which some part o organ was condemned		25	_		60
Percentage of the number in		25			00
spected affected with Tuber	· <del>-</del>	10.27	0.27		2.50
culosis	. 5.98	10.37	0.27	-	2.59
Cysticercosis					
Carcases of which some part o		2			
organ was condemned Carcases submitted to treat		2		-	
ment by refrigeration	. 56	2			-
Generalised & totally con demned					_
definited	•				

#### CYSTICERCUS BOVIS

Fifty-eight cases were discovered during the year, whilst the following table shows the number of animals affected for a period of nine years.

YEAR						NUM	BER OF	CASES
1950	• • •	• • •					5	
1951							10	
1952		• • •					14	
1953							27	
1954							19	
1955			•••	•••	•••	•••	34	
1956	•••	•••	•••	•••	•••	•••	54	
1957	•••	•••	•••	•••	•••	• • •		
1958	•••	•••	•••	• • •	•••	•••	48	
1938	•••	•••	•••	•••	• • •		58	
					T	DTAL	269	

All the affected carcases were placed into deep freeze in accordance with Memo 3/Meat.

TABLE II.
UNSOUND FOOD

	Article		lbs.	Reason for Condemnation
E	BEEF		103.	Reason for Condemnation
	5 whole carcases and offal 14 quarters	•••	2872 2058	
1	/EAL			
	1 whole carcase and offal 4 whole carcases and offal 1 whole carcases and offal 2 whole carcases and offal 1 whole carcase and offal		54 206 50 95 45 32 67 30	Immaturity Umbilical Pyaemia Septicaemia Oedema Enteritis Pathological Emaciation Congenital Tuberculosis Extensive Contusions and Malformation
P	PORK			
	4 whole carcases and offal 1 whole carcase and offal	•••	721 430	Generalised Tuberculosis Purulent Nephritis and Uraemia
I	MUTTON			
	1 whole carcase and offal 1 whole carcase and offal 1 whole carcase and offal VISCERA		50 47 57 27526	Cysticercus Ovis Moribund Oedema Localised Tuberculosis, Parasitic and other conditions

#### UNSOUND FOOD-Contd.

	Artic	Article		lbs.	Reason for Condemnation
MISCELLANE	US				
6,905 tins of I	Fish, M	eat, S	oup,		
Vegetables,	etc.			13036	Pierced, Blown, etc.
826 tins of			and		and the second
Evaporated			• • •	638	Pierced, Blown, etc.
Tinned Ham				3701	Decomposed
Liquid Egg				28	Decomposed
Sausages				31	Decomposed
Chilled and	frozen	Impo	orted		_
	•••	•••	• • • •	904	Decomposed
Imported Mut		Lam	b	126	Decomposed
English Beef	•••	• • •		254	Decomposed
Chickens	•••	•••	• • •	60	Decomposed
		•••		20	Decomposed
Roast Pork		•••		8	Decomposed
Frozen Liver	•••	•••		20	Decomposed
Bacon				260	Decomposed
Salad Cream			• • •	2484	Decomposed
Ground Rice	•••			17	Decomposed
Chocolate Cre	am Cal	kes		24	Contaminated
Milk Powder		• • •	•••	20	Contaminated
FRUIT AND V	EGETA	ABLE	S		
Dates, Prunes,	Figs, e	tc.		530	Damaged by Water
Apples				16	Decomposed
Currants				486	Infested with Mites
Chestnuts				132	Infested with Weevil
Jersey Potatoe				840	Blight
Lettuce				180	Decomposed
FISH					
Cod				88	Decomposed
Haddock		•••	•••	49	Decomposed
Frozen Salmon		•••	•••	6	Decomposed
Halibut		•••	•••	52	Decomposed
Lemon Sole		•••	•••	14	Decomposed
Herrings		•••	•••	28	Decomposed
Prawns		•••	•••	7	Decomposed
Crabs	•••	•••		56	Decomposed
Lobster	•••	•••		56	Decomposed
Mussels	•••	•••	• • •	784	Decomposed
Dutch Cockles	• • • •	•••	•••	112	Decomposed
Daten Cockles		•••	• • •	112	Decomposed

#### FACTORIES ACTS, 1937 AND 1948

#### PART I OF THE ACT

1. INSPECTIONS for the purpose of provisions as to health made by the Public Health Inspectors during 1958.

			Numl	ber of
Premises	Number on Register	nspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections	A H	<b>H</b>	>4	0 24
1, 2, 3, 4 and 6 are to be enforced by Local Authorities (ii) Factories not included in	69	31	1	_
(i) in which Section 7 is enforced by the Local Authority (iii) Other premises in which	261	63	3	-
Section 7 is enforced by the Local Authority (excluding out-				
workers' premises)	3	2	_	_
TOTAL	333	96	4	_
		-		

#### 2. Cases in which DEFECTS were found.

Dest'ester	No. of	Cases in Prosecutions Istituted			
Particulars	Found		Refe To H.M. Inspector	By H.M.	ch ich
Want of cleanliness (S.1)	2	2	_	_	_
Overcrowding (S.2)	_	_	_	_	_
Unreasonable temperature (S.3)	_	_	_	_	_
Inadequate ventilation (S.4) Ineffective drainage of floors	_	—	_	_	_
(S.6) Sanitary conveniences (S.7):	_	_	—	_	_
(a) Insufficient	5	3	_	2	_
(b) Unsuitable or defective	12	9	_	1	_
(c) Not separate for sexes Other offences against the Act (Not including offences re-	1	1	_	1	_
lating to Out work)		_	_		
TOTAL	20	15		4	_

#### PART VIII OF THE ACT

#### **OUTWORK**

(Sections 110 and 111)

NATURE OF WORK	in by	default in Lithe Coun- O	for	of work S premises E	TION	111
(1)	No. of outworkers  Rugust list required  Sect. 110(1)(c)	No. of cases of c sending lists to th	No. of prosecutions failure to supply lists	No. of instances in unwholesome	9 Notices served	(2) Prosecutions
Wearing apparel—Making etc		_	_	_		

